

Evaluation of Genomic Applications in Practice and Prevention: Implementation and Evaluation of a Model Approach

**Secretary's Advisory Committee on
Genetics, Health, and Society
October 18, 2004**

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NIH-DOE Task Force on Genetic Testing

- ✍ Emphasized the need for
 - ✍ Evidence-based entry of new genetic tests into clinical practice
 - ✍ Coordinating collection of data on safety & effectiveness
 - ✍ Post-market surveillance
- ✍ Described assessment criteria
 - ✍ Analytic Validity
 - ✍ Clinical Validity
 - ✍ Clinical Utility



Final report, 1997 - http://www.nhgri.nih.gov/ELSI/TFGT_final/

Secretary's Advisory Committee on Genetic Testing



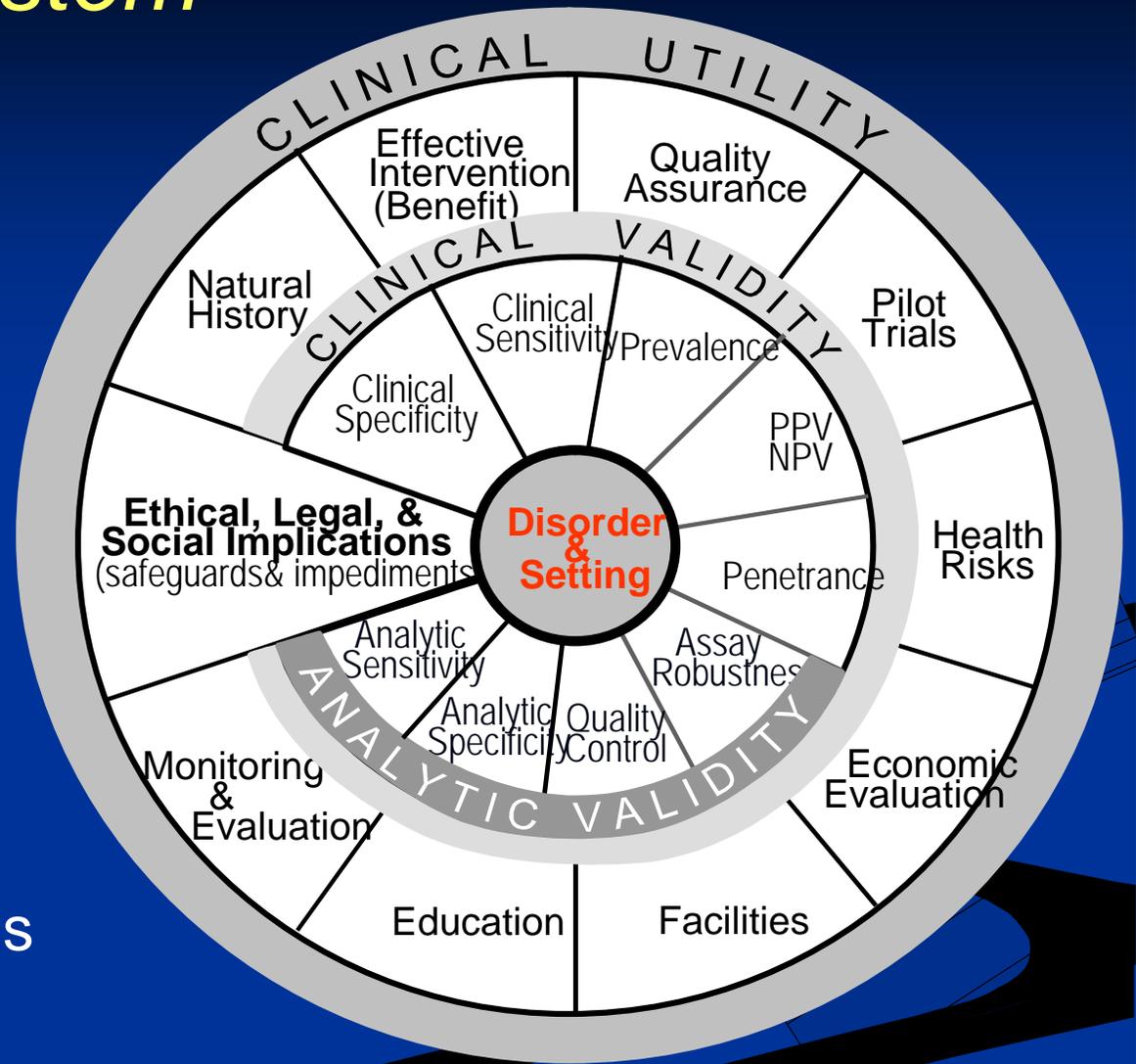
- ✍️ Affirmed Task Force assessment criteria
 - ✍️ Added emphasis on social consequences
- ✍️ Encouraged collaboration between laboratories and HHS agencies to
 - ✍️ facilitate data collection
 - ✍️ provide information to providers & consumers
- ✍️ Suggested enhancements in oversight by
 - ✍️ FDA – pre-market review and approval of new tests
 - ✍️ CMS – augment CLIA regulations
 - ✍️ CDC with other agencies – post-market collection, aggregation, and analysis of data

<http://www4.od.nih.gov/oba/sacgt.htm>



ACCE Model System

- ✍ Developed by the Foundation for Blood Research
- ✍ Name reflects four components of evaluation
- ✍ Define test, disorder, and setting
- ✍ Analytic framework – 40+ targeted questions



<http://www.cdc.gov/genomics/activities/fbr.htm>

ACCE Model System

- ✍ Designed to assess data on DNA-based testing for disorders with a genetic component
 - ✍ Broad focus – “first look” at all available data
 - ✍ Ad hoc approach to grading quality of evidence to extract maximum information
 - ✍ Review, analyze, and integrate data
 - ✍ Did not suggest policy or make recommendations
- ✍ Provide up-to-date, accurate and complete summaries
- ✍ Formats useful to policy-makers, health care providers and the general public

ACCE Reviews

- ✍ Prenatal Screening for Cystic Fibrosis via Carrier Testing
- ✍ Screening for Hereditary Hemochromatosis in Adults via *HFE* Mutation Testing
- ✍ Testing for Factor V Leiden and Prothrombin Mutations as a Risk Factor for Recurrent Venous Thrombosis in Adults
- ✍ Family History and BRCA1/2 Testing for Identifying Women at Risk for Inherited Breast/Ovarian Cancer
- ✍ DNA Testing Strategies Aimed at Preventing HNPCC

<http://www.cdc.gov/genomics/activities/fbr.htm>



Transition from research to clinical and public health practice

- ✍ Evidence-based review to establish safety and efficacy before widespread use
- ✍ Systematic review / integration of data on validity
 - ✍ Assess risks and benefits – clinical utility
 - ✍ Resources for testing, counseling and education
 - ✍ Results of pilot trials
 - ✍ Cost effectiveness analysis
 - ✍ Identify ethical, legal and social implications of testing
- ✍ Appropriate dissemination of evidence summaries, guidelines, & recommendations to target audiences

Data collection and monitoring in the post-implementation period

- ✍ Demonstrate acceptable performance in practice
 - ✍ Confirm or update performance estimates
- ✍ Assess public health impact – including quality, acceptability, utilization, access
 - ✍ Define and quantify problems
- ✍ Document implementation issues
 - ✍ Inform policy changes
- ✍ Assess fit with healthcare delivery systems
- ✍ Resolve gaps and update knowledge base

Evaluation of Genomic Applications in Practice and Prevention (EGAPP): A Three-Year Model Project

- ✍ Establish and evaluate a systematic and sustainable mechanism for pre- and post-market evaluation of genomic applications in the US

EGAPP: A Three-Year Model Project

- ✍ Respond to recommendations for action
- ✍ Use knowledge gained from ACCE model project
- ✍ Interact with
 - ✍ existing processes for evaluation and appraisal
 - ✍ international health technology assessment community
 - ✍ other projects
 - ✍ Quality assurance – CDC process to obtain and distribute QC materials for genetic testing
 - ✍ North American Rare Disease Laboratory Network
 - ✍ Policy initiatives

EGAPP: A Three-Year Model Project

- ✍ Provide clear linkage between the evidence and recommendations
 - ✍ Minimize conflicts of interest
 - ✍ “Evidence-based requires that the linkage be transparent, explicit, and publicly accountable; not that it be objective.” Al Berg
- ✍ Develop a plan for dissemination of information and communication with target audiences

Are genetic tests different?

- ✍ Basic similarities in assessment
 - ✍ Concerns about potential use to discriminate, stigmatize, cause harms to individuals and families
- ✍ Increased awareness of genetic testing and public perception that is “different”
 - ✍ EGAPP addresses a current public health issue
- ✍ Knowledge gained about successful evaluation approaches, methodologies and infrastructure applicable to the assessment of other emerging health technologies

Support for the model project

- ✍ Provided by CDC under a contract for *Program and Policy Assessments and Policy Design*
- ✍ Award to RTI International August, 2004

EGAPP Working Group

Independent
Non-Federal
Multidisciplinary

- ✍ 10-12 experts
 - ✍ Health care
 - ✍ Genomics
 - ✍ Epidemiology
 - ✍ Health technology assessment (HTA)
 - ✍ Public health
- ✍ Scheduled meetings

Roles of Working Group

- ✍ Define protocols for evidence-based reviews (EBR) and development of recommendations
- ✍ Consider input from stakeholders, develop criteria, select and prioritize topics
- ✍ Request EBR, oversee quality review of reports
- ✍ Develop recommendations based on reports
- ✍ Consider needs and strategies for post-implementation monitoring and data collection
- ✍ Take part in evaluation of the project
 - ✍ Process, products, and value/impact

Stakeholders

Health care providers

Consumers

**Professional
organizations**

Policy makers

Public health

**Industry /
biotechnology**

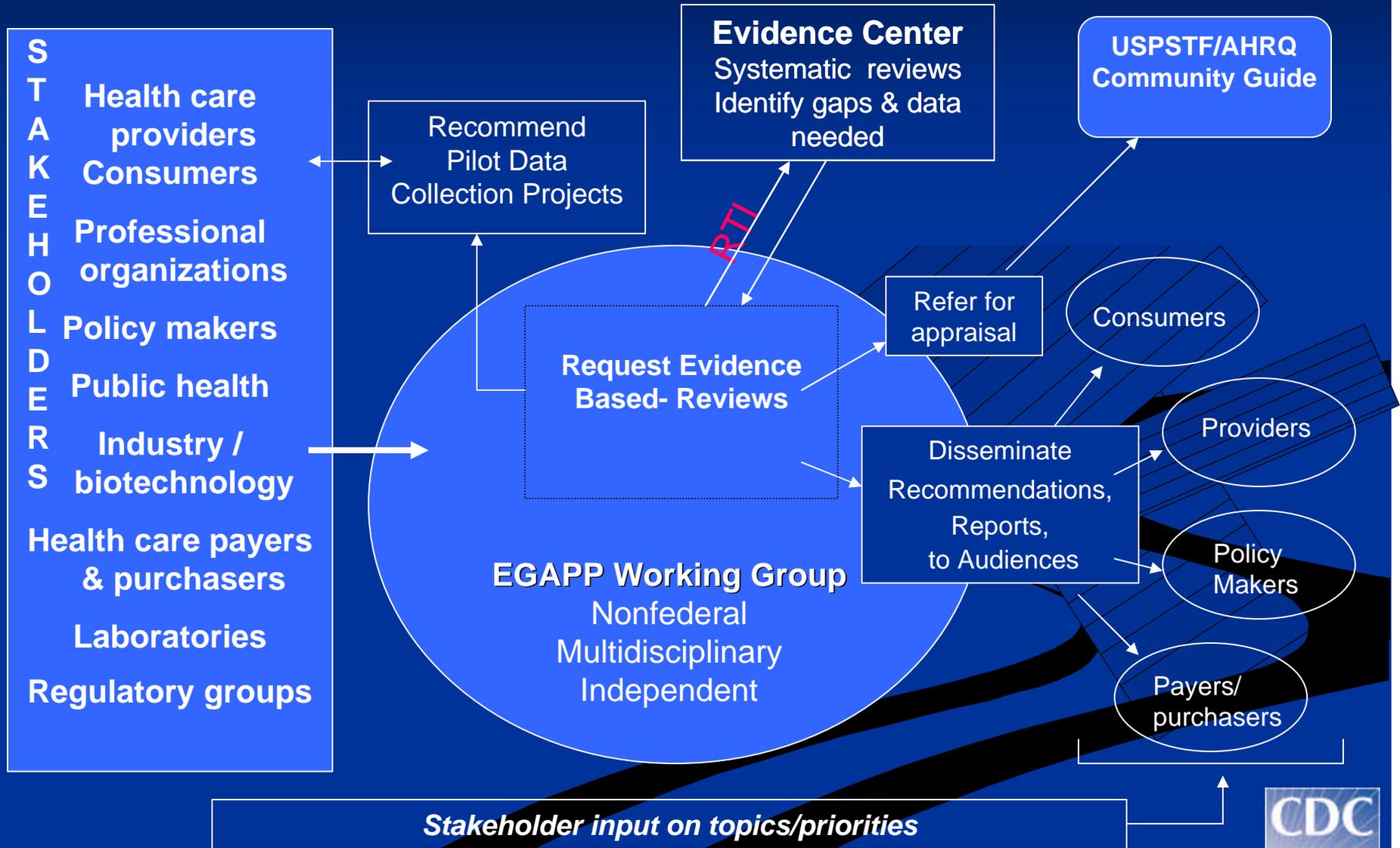
**Health care payers &
purchasers**

Laboratories

Regulatory groups

- ✍ Identify & engage
- ✍ Needs assessment
 - ✍ Specific topics for immediate consideration
 - ✍ Content and format of information needed and useful from their perspectives
- ✍ Content experts
 - ✍ Technical assistance, peer review of reports
 - ✍ Development of informational messages for key target audiences

EGAPP overview



EGAPP - Year 1

- ✍ Process development
 - ✍ Recruitment of Working Group
 - ✍ Two organizational meetings
 - ✍ Development of working protocols
- ✍ Methodology meeting
- ✍ Preliminary needs assessment
- ✍ Pilot data collection studies
- ✍ Evaluation – focus on process

EGAPP - Years 2 and 3

- ✍ Continuing support of Working Group
- ✍ Commissioning / oversight of EBRs
- ✍ Dissemination of reports, Working Group recommendations, and informational messages
- ✍ Ongoing dialogue with stakeholders
 - ✍ Development of informational messages for target audiences
 - ✍ Feedback on the value of the process and products
- ✍ Pilot data collection studies
- ✍ Evaluation - process, products and impact
- ✍ Mechanisms to sustain a validated evaluation process

Why talk about methodology?

- ✍ Standard processes / methodologies not as effective
 - ✍ Conditions are often less common
 - ✍ Interventions and clinical outcomes not well defined
 - ✍ Limited evidence base
 - ✍ Data collected after introduction into clinical practice
 - ✍ Argument for efficacy based on descriptive evidence, no clinical trials
 - ✍ Ethical, legal, and social issues less amenable to evidence-based approach
 - ✍ Influence of advocacy from industry and patient interest groups

Methodology meeting – January 2005

- ✍ Experts in EBR, HTA, epidemiology, genomics
- ✍ Focus on elements of evaluation process
 - ✍ Define the test, the disorder, the setting
 - ✍ Analytic framework for EBR
 - ✍ Literature search and synthesis
 - ✍ Grading quality of evidence
 - ✍ Evidence to recommendations
- ✍ Seek agreement on minimum standards
 - ✍ When is a test “ready” to move into clinical practice?
 - ✍ Amount of information? Threshold for quality of evidence?
 - ✍ How do we optimize the quality of data to be collected in the future?

Rationale for EGAPP

✍ Now is the time

- ✍ Genetic tests are increasing in number and complexity
- ✍ New applications are anticipated
- ✍ Testing will move into primary care
- ✍ Health care providers and the public need a source of objective advice about appropriate use of tests

✍ Short-term - provide information to address questions posed by SACGT and SACGHS

- ✍ Oversight of genetic technologies
- ✍ Coverage and reimbursement
- ✍ Access, public awareness and understanding

Rationale for EGAPP

Long-term

-  Create an expectation that a certain level of review will occur prior to acceptance in routine practice
-  Standardization of data collection formats
-  Development & funding of research agenda
-  Support post-market review of testing practices, clinical guidelines, and recommendations based on new information

- ✍ The ACCE project was supported by a cooperative agreement between the CDC Office of Genomics and Disease Prevention and the Foundation for Blood Research (CCU319352)
- ✍ The EGAPP project is supported by the CDC Office of Genomics and Disease Prevention through a contract with RTI International (200-01-00123 TO36)

